# Washington State House of Representatives

BILL ANALYSIS

Office of Program Research

# **Health Care Committee**

# **HB 1498**

**Brief Description:** Modifying the scope of care provided by physical therapists.

**Sponsors:** Representatives Morrell, Campbell, Cody, Kagi and Santos.

# **Brief Summary of Bill**

- Redefines practice parameters and permissible activities for physical therapists to include examinations to determine proper diagnoses and plans for therapeutic interventions; designing and implementing interventions; training and evaluating patients with orthotic or prosthetic devices; and performing wound debridement and management.
- · Specifies permissible medications for physical therapists to administer.
- Establishes rules relating to the referral of patients to and from other health care practitioners.
- · Defines assistive personnel in the physical therapy practice and sets limits on their use.
- · Clarifies matters related to licensing and exemptions from licensure.

**Hearing Date:** 2/4/03

**Staff:** Chris Blake (786-7392).

#### **Background:**

In Washington State, physical therapists are regulated by the Department of Health and the Board of Physical Therapy.

Physical therapists conduct tests to measure the strength, range of motion, balance and coordination, muscle performance, and motor function of patients with movement or mobility problems due to injury or disease. With this information they develop treatment plans and perform services for patients to restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities.

Physical therapists work in several different settings including hospitals, private offices,

clinics, public schools, nursing homes, and rehabilitation centers. Some physical therapists specialize in certain areas such as pediatrics, geriatrics, orthopedics, sports medicine, neurology, and cardiopulmonary physical therapy.

## **Summary of Bill:**

## Practice of Physical Therapy

The general and non-specific description of the practice of physical therapy as applying to any bodily or mental condition is replaced with more specific parameters referencing the practice's basis in movement science and functional limitations in movement.

The range of physical therapist activities including (1) the use of heat, cold, air, light, water, electricity, sound, massage, and therapeutic exercise and (2) the performance of tests and measurements of neuromuscular function are replaced with more specific activities. Permissible activities are redefined to include (1) examining patients to determine proper diagnoses and plans for therapeutic interventions; (2) designing and implementing therapeutic interventions; (3) training and evaluating the function of people wearing orthotic or prosthetic devices; (4) performing wound debridement and management; (5) reducing the risk of injury, impairment, functional limitations, and disability; and (6) engaging in consultation, education, and research.

#### Medications

Physical therapists may purchase, store, and administer medications including hydrocortisone, fluocinonide, and silvadine. Physical therapists may administer other drugs and medications as prescribed by a physician. The Secretary of Health, in consultation with the Board of Physical Therapy, the Board of Pharmacy, and the Medical Quality Assurance Commission, may adopt rules to allow physical therapists to use legend drugs and devices.

#### Referral Requirements

When a physical therapist believes that a person has symptoms or conditions that are beyond the scope of practice of a physical therapist or if it is believed that physical therapy is contraindicated, he or she must refer the person to an appropriate health care practitioner.

A proviso requiring referral or consultation by an authorized health care practitioner in order to provide treatment using certain orthoses is removed.

A physical therapist can only perform electroneuromyographic examinations upon referral from an authorized health care provider.

#### Assistive Personnel

Three categories of assistive personnel are defined: "physical therapist assistants;" "physical therapy aides;" and "other assistive personnel." They may assist a licensed physical therapist with delegated or supervised tasks or procedures that are within the practice of physical therapy according to their level of training. Physical therapy aides and other assistive

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personnel can only provide these services under the on-site supervision of a licensed physical therapist.

### Matters Related to Licensure

The practice of physical therapy without a license is prohibited. Licensing requirements do not apply to: (1) people satisfying supervised clinical education requirements as part of a physical therapist education program; (2) physical therapists practicing in the military, United States public health service, or veteran's administration; or (3) physical therapists credentialed out-of-state who are teaching or participating in an educational seminar.

Physical therapist license applicants must have a degree, but it is no longer required to be a baccalaureate.

**Appropriation:** None.

Fiscal Note: Requested on January 29, 2003.

**Effective Date:** The bill takes effect ninety days after adjournment of session in which bill is passed.

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